Alexandria Mardi Gras Association

Alexandria, Rapides Parish, LA.

TRANSMITTAL LETTER

ANNUAL FINANCIAL STATEMENTS

04/19/2021

ereports@lla.la.gov

In accordance with Louisiana Revised Statute 24:513, enclosed are the Affidavit and Revenue Certification Form and the annual financial statements for my entity, as of and for the year ended 03/31/2021 (entity's year-end). The statements include all funds under the control of this entity. The accompanying financial statements have been prepared on the cash basis of accounting.

Sincerely,

Lacy Morales

Treasurer

Alexandria Mardi Gras Association, Inc.

Enclosures

Entity Name: Alexandria Mardi Gras Association, Inc.
Address:P. O. Box 13651, Alexandria, LA 71315-3651
Telephone: 318-473-9501 Email: lacymorales@suddenlink.net
This annual sworn financial statement is required to be filed with the Legislative Auditor within 90 days of the end of the entity's fiscal year by sending a pdf copy by email to ereports@lla.la.gov , faxing to 225-339-3986, or mailing to Louisiana Legislative Auditor — Local Government Services, P.O. Box 94397, Baton Rouge, LA 70804-9397.
AFFIDAVIT
Personally came and appeared before the undersigned authority, <u>Lacy Morales</u> (officer's name),
who, duly sworn, deposes and says that the financial statements herewith given present fairly, in all material
respects, the financial position ofAlexandria Mardi Gras Association, Inc (entity's name) as of
March 31, 2021 (entity's year-end) and the results of operations for the year then ended, in
accordance with the basis of accounting described within the accompanying financial statements; that the
entity has maintained a system of internal control structure sufficient to safeguard assets and comply with
laws and regulations; and that the entity has complied with all laws and regulations, except as
follows:
Complete if Applicable: In addition,Lacy Morales (officer's name), who duly sworn, deposes, and
says that Alexandria Mardi Gras Association, Inc. (entity's name) received \$75,000 or less in
revenues and other sources for the year endedMarch 31, 2021 (entity's year-end), and accordingly,
is not required to have an audit for the previously mentioned fiscal year.
OFFICER'S SIGNATURE Treasurer OFFICER'S TITLE
Sworn to and subscribed before me, this 19th day of april , 20 2]
NOTARY PUBLIC SIGNATURE & SEAL STEPHEN SPURGEON Notary Public State of Louisiana Rapides Parish Notary ID # 156479 My Commission is for Life

Statement of Receipts and Disbursements

Statement A

	General Fund						Other Fund		Total	
RECEIPTS (Provide Brief Description):	c	E 450	æ		c.	E 4E0				
1.Public Funds and Grants	\$	5,450	Φ		_ \$_	5,450				
2.Parade Income	_	2,700	_			2,700				
3.Fund Raiser		0	_			0				
4.Other Income		0				0				
5. 6. Total receipts (add lines 1 - 5)	\$	8,150	\$		_ \$	8,150				
DISBURSEMENTS (Provide Brief Description):	•	0.070	•		Φ.	0.070				
7. Parade Expense – All Parades	\$	8,370	\$		_ \$	8,370				
8. Administration Expense	_	2,403	_			2,403				
9. Fund Raise Expense		1,967	_			1,967				
<u>10.</u> <u>11.</u>	_		_							
12.										
13. Total Disbursements (add lines 7 - 12)	\$	12,740	\$		_ \$_	12,740				
14. Change in fund balance (Lines 6 minus 13)	\$	(4,590)	\$		_ \$	(4,590)				
15. Fund Balance at beginning of year	\$	98,962	\$		\$	98,962				
16. Fund balance (deficit) at end of year (Add lines 14-15)This amount also goes on line 12, Statement B	\$	94,372	\$		\$	94,372				

Identify the Basis of Accounting, if not using Cash-Basis:

NOTE: If the entity receives any funds from pre- or post-adjudication court costs, fines, and/or fees, the entity must use one or more of the following categories in the receipts description fields: Civil Fees; Bond Fees; Asset Forfeiture/Sale; Pre-Trial Diversion Program; Criminal Court Costs/Fees; Criminal Contempt Fines; Other Criminal Fines; Restitution; and Probation/Parole/Supervision Fees.

Balance Sheet				State	ement B
	_	General Fund	Other Fund		Total
ASSETS (balances at year-end)					
Cash and cash equivalents	\$	94,372	\$	\$	94,372
2. Investments (fair value)	.0				
3. Office furnishings (Cost of desks, etc)					
4. Equipment (Cost of fax machine, etc)		10,000			10,000
5. Other (brief description) Accumulated Depreciation		(10,000)			(10,000)
6. Total Assets (add lines 1 - 5)	\$	94,372	\$	\$_	94,372
LIABILITIES AND FUND BALANCE (at year-end):					
7. Liabilities (brief description):	\$		\$	\$_	
8.					
9.					
10.					
11. Total Liabilities (add lines 7 - 10)					
12. Fund balance (amount from Line 16 on Statement A)		94,372			94,372
13. Other					
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$	94,372	\$	\$	94,372

Statement C

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name and Title: Christopher Chelette, President

Purpose	Dollar Amount			
1. Salary	1.			
2. Benefits-insurance	2.			
3. Benefits-retirement	3.			
Benefits-other (describe)	4.			
5. Benefits-other (describe)	5.			
6. Benefits-other (describe)	6.			
7. Car allowance	7.			
8. Vehicle provided by government (if reported on your W-2)	8.			
9. Per diem	9.			
10. Reimbursements	10.			
11. Travel	11.			
12. Registration fees	12.			
13. Conference travel	13.			
14. Housing	14.			
15. Unvouchered expenses (example: travel advances, etc.)	15.			
16. Special meals	16.			
17. Other	17.			
18. TOTAL (enter total of line 1-17)	18.			

X Please check here if the Agency Head does not receive any compensation, benefits, and other payments. (Act 462 of the 2015 Legislative Session allows nongovernmental entities or not-for-profit (quasi-public) entities to report on the Act 706 schedule **only** those payments to the agency head that are derived from the public funds.)